

**SUMMARY OF CAMPAIGN CONTRIBUTIONS AND EXPENSES**  
**2000 PRIMARY AND GENERAL ELECTIONS**

State of Nevada

MIKE TOURIN SUN VALLEY G.I.D.  
Candidate's Name(print) Office District (if applicable)  
6255 W. CHINOOK CT. SUN VALLEY, NV 775-674-1854  
Mailing address (include city and zip code) Telephone Number

**REPORT NUMBER 1 - DUE AUGUST 29, 2000**

Report Period **Began:** December 17, 1994, for an office with a six year term  
Report Period **Began:** December 21, 1996, for an office with a four year term  
Report Period **Began:** December 19, 1998, for an office with a two year term

Report Period **Ends:** August 23, 2000

**FILED**  
*[Signature]*  
AUG 24 2000  
Dean Heller  
Secretary of State

Cash on hand from previous campaign (should equal the balance shown on your last disposition of unspent contributions report), if any 11.22

**CONTRIBUTIONS SUMMARY**

1. Total Amount of contributions in excess of \$100	<u>1500</u>
2. Total amount of contributions of \$100 or less	<u>NONE</u>
Actual number of contributions of \$100 or less _____	
3. Interest and income earned, if any	<u>NONE</u>
4. <b>TOTAL AMOUNT OF ALL CONTRIBUTIONS</b> (add lines 1 through 3)	<u>1500</u>

**EXPENSES SUMMARY**

5. Total amount of expenses in excess of \$100	<u>273.49</u>
6. Total amount of expenses of \$100 or less	
7. Expense for filing fee	<u>30</u>
8. <b>TOTAL AMOUNT OF ALL EXPENSES</b> (add lines 5 through 7)	<u>303.49</u>

**If no contributions or expenses are listed during this Report Period, only this page of the report needs to be filed with your filing officer.**

I declare under penalty of perjury that the foregoing is true and correct.

Executed on

8/24/00  
Date

*[Signature]*  
Signature of Candidate

## CAMPAIGN CONTRIBUTIONS

REPORT PERIOD Number 1

MIKE TOURIN

SUN VALLEY G.T.D

Candidate's Name (print)

Office

District (if applicable)

Contributions in Excess of \$100 or, When Added Together Exceed of \$100

CONTRIBUTOR'S NAME AND ADDRESS	DATE(S) OF EACH CONTRIBUTION	AMOUNT OF EACH CONTRIBUTION(S)	CHECK <input checked="" type="checkbox"/> IF LOAN	CHECK <input checked="" type="checkbox"/> IF IN KIND
LIFESTYLE HOMES 80 CALISTOGA CT. GOLD SPRINGS, NV. 89506	JULY 2000	\$500		

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MIKE TOURIN  
Candidate's Name (print)

SUN VALLEY G.I.D.  
Office

District (if applicable)

### Contributions of \$100 or Less

[illegible][illegible]

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MIKE TOURIN SUN VALLEY G.I.D.  
 Candidate's Name (print) Office District (if applicable)

## Expenses Categories

CATEGORIES	CODE	TOTALS
Office expenses	A	
Expenses related to volunteers	B	
Expenses related to travel	C	
Expenses related to advertising <i>SIGNS AND REBAR AND WIRE</i>	D	273.49
Expenses related to paid staff	E	
Expenses related to consultants	F	
Expenses related to polling	G	
Expenses related to special events	H	
Goods and services provided in kind for which money would otherwise have been paid	I	
Other miscellaneous expenses	J	

MIKE TOURIN  
Candidate's Name (print)SUN VALLEY GID  
Office

District (if applicable)

## Expenses in Excess of \$100

NAME AND ADDRESS OF PERSON, GROUP OR ORGANIZATION WHO RECEIVED THE PAYMENT FOR THE EXPENSE(S)	CATEGORY	DATE(S) OF EACH EXPENSE	AMOUNT(S) OF EACH EXPENSE
ART IMAGES 76 GLEN CARREN CIR. SPARKS, NV.	D	8/14/20	273. <sup>49</sup> / <sub>100</sub>

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